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Bib Data Sheet

CONFIRMATION NO. 8078

<b>SERIAL NUMBER</b> 09/934,310	<b>FILING DATE</b> 08/21/2001 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> S63.2-10078
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**APPLICANTS**  
G. David Jang, Redlands, CA;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CON OF 09/574,077 05/18/2000 *Probile*  
WHICH IS A CON OF 08/845,734 04/25/1997 ABN  
WHICH IS A CIP OF 08/824,142 03/25/1997 PAT 6,241,760  
AND A CIP OF 08/824,866 03/26/1997 PAT 5,954,743  
AND A CIP OF 08/824,865 03/26/1997 PAT 6,152,957  
AND A CIP OF 08/845,657 04/25/1997 PAT 5,922,021  
WHICH CLAIMS BENEFIT OF 60/017,484 04/26/1996

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *021-33 canceled*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 09/14/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 8	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**  
490

**TITLE**  
Intravascular stent

<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit